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Written on August 13, 2015 at 6:00 am by [svanderwerff](#)

## [NCCOSC Contributes to Medical Research](#)

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By Naval Center for Combat & Operational Stress Control Public Affairs



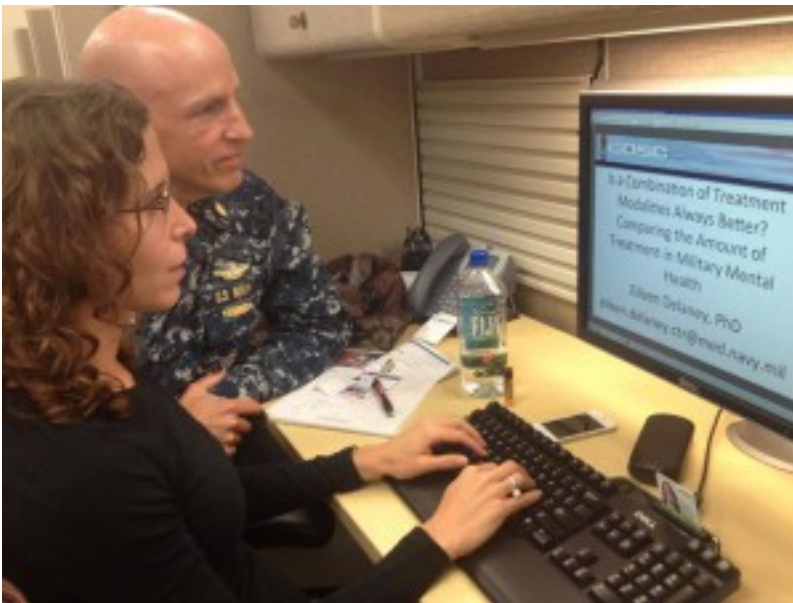
Capt. Scott Johnston, NCCOSC director, discusses electronic data capture for improving patient care at the 2014 Combat & Operational Stress Control Symposium.

At the [Naval Center for Combat & Operational Stress Control \(NCCOSC\)](#), we are improving the psychological health care Navy Medicine delivers to wounded, ill, and injured service members, by contributing to research on several relevant topics.

One such topic currently in our research pipeline is military sexual trauma (MST), an issue that is

especially relevant in today's military. According to a survey conducted by the Pentagon, an astounding 26,000 service members were sexually assaulted in 2012—a 36 percent increase from 2010. MST is defined by Title 38 US Code 1720D as “psychological trauma, which in the judgment of the mental health professional...resulted from a physical assault of a sexual nature, battery of a sexual nature, or sexual harassment...that occurred while [the veteran] was serving on active duty or active duty training.”

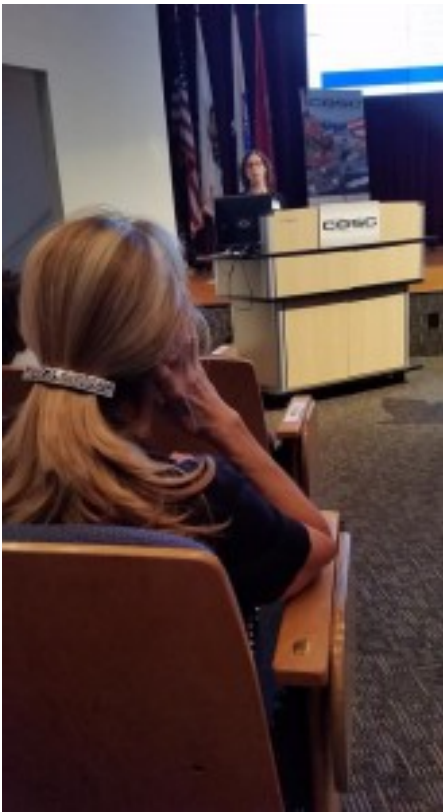
Military sexual trauma is detrimental to unit cohesion and mission readiness. It impacts job satisfaction and work productivity and can cause depression, anxiety, post-traumatic stress disorder (PTSD), and substance use. It has the potential to negatively affect general overall health. MST has also been shown to increase homelessness. We, at NCCOSC, are collaborating with other Navy Medicine personnel from [Naval Medical Center San Diego \(NMCS D\)](#) and [Naval Base San Diego](#), to determine the number of military sexual assault cases being referred for a med board (where a service member is evaluated for his or her ability to continue to serve in the military).



Capt. Johnston and Eileen Delaney, PhD, present a poster virtually to the Warrior Resilience Conference.

Another study in the works at NCCOSC pertains to the use of Spice (synthetic marijuana) at a substance abuse treatment center. We are collaborating with NMCS D psychiatrist Lt. Cmdr. George Loeffler in reviewing two years' worth of clinical charts from a Navy substance abuse treatment facility to compare the records of active-duty service members who have used Spice compared to those who did not. We are comparing the Spice and non-Spice users on their PTSD, depression, and anxiety scores, and we are exploring the effect those psychological issues have on the service members' ability to complete the substance abuse program, and how they fare upon completion of the program. We are also exploring the relationship between Spice use and co-occurring mental health and substance use disorders.

We are also partnering with a clinical psychologist at NMCS D's Overcoming Adversity and Stress Injury Support (OASIS) program for a study on moral injury (the internal conflict that may arise in the context of deployment and combat)—specifically, the causes and consequences of moral injury. We will be conducting focus groups at NMCS D and Camp Pendleton with active-duty sailors and Marines, Navy mental health providers, and Navy chaplains to gain insight into the concept of moral injury. Our hope is that we can learn more about the best way to treat moral injury in a clinical setting.



Eileen Delaney, PhD, presents at the 2014 Combat & Operational Stress Control Symposium.

Military operations present many physical and psychological challenges for service members to adapt to and overcome, which often carry with them a great deal of stress. One such stressful military environment is the Surface Warfare Independent Duty Corpsman (IDC) School in San Diego, Calif. IDC School is an example of a training environment where some students may be entering the program with symptoms of PTSD, which may affect their performance in the course. In addition, it is an environment where the service member is expected to excel while being subjected to multiple sources of stress.

We joined forces with NMCSO to measure the effectiveness of two methods of mitigating stress in IDC students. These methods are coherence training, where one learns to self-regulate their emotions through heart rate variability biofeedback; and progressive muscle relaxation, where stress is regulated by the tensing and releasing of the major muscle groups accompanied by relaxed breathing techniques. We will be evaluating the effectiveness of these two methods on IDC students' levels of depression, PTSD, anxiety, stress, sleep quality, and class performance.

Every day, the research facilitation department at NCCOSC advances research in the areas of military psychological health, operational injuries and evidence-based treatment, with the goals of building resilience and preventing or alleviating psychological injuries. The department collaborates with line, Fleet Marine Forces, and Navy Medicine clinicians, residents, interns, and community researchers who lack the time, experience, funding or support to collect and analyze data and disseminate results. The end goal – Improve the quality and delivery of psychological health care, and fulfill Navy Medicine's vision of World-Class Care...Anytime, Anywhere.

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